



Natick Recreation and Parks Department

"Create Community through People, Parks and Programs"

June 29 Mini Triathlon



Date: Sunday, June 29, 2014
Time: 9:30 am *(Registration at 8:30 am)*
Fee: \$25.00 Individual Event • \$40.00 Team/Family Event
Location: Memorial Beach • West Street • Natick, MA

14 & Under, Team and Adult Division "B" - 1/8 Mile Swim • 2 Mile Bike Course • 1 Mile Run

~OR~

Open Division • 1/4 Mile Swim • 2 Mile Bike Course • 1 Mile Run

(Distances are Approximate)

RACE AWARDS TO:

First Male/Female In Each Age Group (14 & Under) (15 - 39) (40 plus)

Team event to have no age division but will have awards



Mini Triathlon Registration Form

| | | | | | | | | | |
|--|--|---|--|--|---|--|--|--|--|
| <input type="checkbox"/> Male <input type="checkbox"/> Female | | Age Division for Individual Event: <input type="checkbox"/> 14 & Under <input type="checkbox"/> 15 - 39 <input type="checkbox"/> 40 + | | | Adult Division: <input type="checkbox"/> A <input type="checkbox"/> B | | Team Divisions: <input type="checkbox"/> All Male <input type="checkbox"/> All Female <input type="checkbox"/> Mixed | | |
| Name _____ Age _____ | | Name _____ Age _____ | | | Name _____ Age _____ | | | | |
| Address _____ Tel _____ <small>(A/C)</small> | | Address _____ Tel _____ <small>(A/C)</small> | | | Address _____ Tel _____ <small>(A/C)</small> | | | | |
| City/State _____ ZIP _____ | | City/State _____ ZIP _____ | | | City/State _____ ZIP _____ | | | | |
| Signature _____ <small>(Parent if Participant is 17 or under)</small> | | Signature _____ <small>(Parent if Participant is 17 or under)</small> | | | Signature _____ <small>(Parent if Participant is 17 or under)</small> | | | | |

Parental/Participant Consent, Release from Liability and Indemnity Agreement

Please turn over to read and sign the Parental Consent, Release from Liability and Indemnity Agreement Form.

NOTE: This form **MUST BE SIGNED** in order to participate in the programs you are registering for.

Payment Method: Amount Due \$ _____ ☐ Cash ☐ Check # _____ ☐ Visa/MC _____ CVC# _____ Exp. ____/____

Please register at the Natick Recreation and Parks Department Office • 179 Boden Lane • Natick, MA 01760 • Phone (508) 647-6530

Consent, Release from Liability and Indemnity Agreement

On behalf of myself/my child, a minor, I hereby consent to my/my child's participation in voluntary athletic, recreation programs or extra-curricular activities of the Town/City and/or Public Schools of Natick (hereinafter "the Town/City").

I/We also agree to forever RELEASE the Town/City, a municipal corporation of the Commonwealth of Massachusetts, and/or the Public Schools of Natick, the School Committee, and all their employees, officers, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic, recreation programs or extra-curricular activities of the Town/City or Public Schools ("the Releasees") from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and attorney's fees that may have arisen in the past, or may arise in the future, directly or indirectly, from known and/or unknown personal injuries to me/my child or property damage resulting from my/my child's participation in the said Town/City and/or Public School's voluntary athletic, recreation program or extra-curricular activity which I/we may now or hereafter have as the parent(s) or guardian(s) of said minor child and which said minor child has or hereafter may acquire, either before or after reaching majority.

I/We also promise, to INDEMNIFY, REIMBURSE, DEFEND and HOLD HARMLESS the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including damages, costs and attorney's fees, arising from personal injuries to me/my child or property damage resulting from my/my child's participation in the Town/City and/or Public Schools of Natick voluntary athletic, recreation programs or extra-curricular activities or administration of first aid.

I/We further affirm that I/We have read this Consent, Release from Liability and Indemnity Agreement, and that I/We understand the contents of this Agreement. I/We understand that my/my child's participation in these programs is voluntary and that my child and I/we are free to choose not to participate in said programs. By signing this agreement, I/we affirm that I/we have decided to allow me/my child to participate in the Town/City and/or Public School's athletic, recreation programs or extra-curricular activities with full knowledge that the Releasees will not be liable to anyone for personal injuries and/or property damage my child or I/we may suffer in the voluntary Town/City and/or Public School athletic, recreation programs or extra-curricular activities.

I realize injuries can occur from participation in sports and other activities. Should I/my child be taken to the hospital for emergency purposes, I hereby grant permission to the attending physician to administer anesthesia, medical, x-ray and surgical procedures as may be deemed necessary or advisable.

I understand that every reasonable attempt will be made to contact me/my designated emer. contact in an emergency.

Signature _____ Date _____
(If under 18, parent or guardian)